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APPLICANTS

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**** CONTINUING DATA *******

g This application is a REI of 08/387,257 02/13/1995 PAT 5,551,427 and is a DIV of 09/146,120 09/01/1998 PAT R,E37,463

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

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**** SMALL ENTITY ****

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 16	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				

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TITLE

IMPLANTABLE DEVICE FOR PENETRATING AND DELIVERING AGENTS TO CARDIAC TISSUE

FILING FEE RECEIVED 1375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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